

# **EXHIBIT E**

62

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
<b>INMATE'S REQUEST TO STAFF MEMBER</b>		<b>INSTRUCTIONS</b> Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
1. To: (Name and Title of Officer) <u>Ms Shiader (Counselor)</u>		2. Date: <u>4-28-20</u>	
3. By: (Print Inmate Name and Number) <u>Joseph Shaggy GM1483</u> <u>[Signature]</u> Inmate Signature		4. Counselor's Name: <u>MS S</u>	
		5. Unit Manager's Name: <u>MS D</u>	
6. Work Assignment: <u>C.I</u>		7. Housing Assignment: <u>B-B-62</u>	
8. Subject: State your request completely but briefly. Give details.			
<p>I was suspended from work for writing a grievance. I wanted to know how long I am suspended and how long I am allowed to be denied pay.</p>			
9. Response: (This Section for Staff Response Only)			
<p>You are suspended until a job removal stepping occurs. Due to quarantine protocol, the procedures for stepping has likely changed. Write to MS. Giles as she oversees job removal stepping.</p>			
To DC-14 CAR only <input type="checkbox"/>		To DC-14 CAR and DC-15-IRS <input type="checkbox"/>	

STAFF MEMBER NAME \_\_\_\_\_

Print

Signature

DATE 4/29/20